1. Will this course revision affect a current program?          Yes        No
If ‘yes’, has a Program Revision Form been submitted concurrently?                       Yes        No

2. Teaching Department: School of Computer Science

3. Administering Faculty/Unit: Science

4. Campus (Downtown, Macdonald, Off Campus, Distance Ed, Other – specify)

5. Effective Term of Implementation (Ex. Sept. 2004 = 200409)

6. Responsible Instructor: Xiao-Wen Chang

7. Credit Weight (or CEU’s for non-credit CE courses):

   4

   Old Credit Weight or CEU’s (if applicable)

8. Course Number(s)

   Subject/course number: COMP 642

   Course(s) Span:

   1 term

   2 consecutive terms (D1, D2)

   3 non-consecutive terms (N1, N2)

   3 consecutive terms (J1, J2, J3)

9. Number Change From:

10. Consolidation of Courses:

11. Split of Multi-Term Course:

12. Course Title (Limit 30 char.) - required for all courses.

   Numerical Estimation

   Old Course Title (if applicable)

   Numerical Estimation

13. Course Title to Appear in the Calendar (Optional)

   (Limit 59 characters):

   Note: This can ONLY be an expansion of word(s) abbreviated in the 30 character course title in Box 12.

   Numerical Estimation Methods

14. Rationale for revised course

   Change: drop COMP 540 as a co-requisite.

   Rationale: The course material has been slightly revised so that COMP 540 is not required as a co-requisite. This change will allow students to take this course without taking COMP 540. Thus, it provides students with more flexibility in their program.

15. New Course Description (as it will appear in the Calendar [maximum 50 words]):

   (N.B. Faculty of Medicine must append complete course outline)

   NO CHANGE

16. Old Course Description (may be found in the Calendar or Banner)
17. Supplementary information to appear in the Calendar in addition to the course description. Such as: equivalent course(s), contact hours, enrolment limitations, language of instruction etc. Please enter the information as it should appear in the calendar notes.

NO CHANGE

18. Schedule Types(s):
(Enter all that apply – see course guidelines for a complete list.)

<table>
<thead>
<tr>
<th>Lecture</th>
<th>Hours per Week</th>
<th>Hours per Week</th>
<th>Hours per Week</th>
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</table>

Total Hours per Week: 3
Total Number of Weeks: 13

19. Projected Enrolment:

20. Revised Prerequisite(s) (Courses or Tests) (in full)
Specify course number(s) or name(s) of test(s):

If the student does not have a prerequisite should web registration be blocked?
☐ Yes ☐ No

If "Yes" complete A and B:

A. Indicate minimum grade or test score(s) the student must attain in prerequisite course(s) or test(s):

B. Can the prerequisite course(s) or test(s) be taken in the same term as this course?
☐ Yes ☐ No

Old prerequisite course number(s) or test score title(s) (if applicable)

21. Revised Corequisite(s) Course Number(s) (in full):
Specify course number(s):

If the student does not register for the corequisite in the same term should web registration be blocked?
☐ Yes ☐ No

Old corequisite(s) course numbers (if applicable):

COMP 540

22. Revised Restriction(s):

Old Restriction(s):

23. Additional Course Charges (must be approved by the Fee Policy Committee)
Description of Fee (e.g. screening fee)
Amount

24. Requires Teaching, Physical, or Financial Resources
Not Currently Available (attach explanation)
☐ Yes ☐ No

25. Consultation Reports Attached
☐ Yes ☐ N/A
### INFORMATION FOR ADMISSIONS, RECRUITMENT & REGISTRAR'S OFFICE

**To be completed by the Faculty**

- Slot Course: [ ] Yes [ ] No
- CIP Code

**To be completed by ARR**

- CE Admin. Unit:
- CE Non-Grant Courses:

**For Continuing Education Use**

- Flat Rate: CdnFlat Rate: [ ] Yes [ ] N/A

#### 26. Approvals:

<table>
<thead>
<tr>
<th>Routing Sequence</th>
<th>Departmental Meeting</th>
<th>Departmental Chair</th>
<th>Other Faculty</th>
<th>Curric/Academic Committee</th>
<th>Faculty</th>
<th>SCTP</th>
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<tbody>
<tr>
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**Departmental Contact Person**

(name/phone/email)

Marisa Lento/ ext.00895/ marisa@cs.mcgill.ca

C2-3